Washington, D.C. 20231

	PEOUR		02		
1 Date	REQUEST FOR PATENT of Request: 7/8/16	FEE REFUND			
	70/0) 20	erial/Patent	10/5196		
3 Pleas	Torung the following for	4 PAPED	T 3	₹28	
		NUMBER	DATE		
1 11 1	mendment	1	12/15/11/6	AMOUNT	
Ex	tension of Time		\$	5000	
Notice of Appeal/Appeal			\$		
recttion			\$		
Iss			\$		
Cert of Correction/Terminal Disc.			\$		
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	gnment		\$		
Othe	r		\$		
			\$		
7 TOTAL AMOVE					
10 REASON:		T KERUND)	
Overpa	ayment	8 TO BE REFU			
Duplic	Cate Dec	Treat	Credit Check Credit		
1 CLEUIT No.				#:	
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME:					
SIGNATURE.					
OPPRESENTATION OF TITLE:					

######################################					
			***********	**	
Instructions for completion of this form appear on the back					
copies to the official si appear on the hart					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

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